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**CALIFORNIA FRUIT AND VEGETABLE INTAKE CALIBRATION STUDY***Cancer Research Projects*

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*Description*

The priority of the California Department of Health Services is to increase the fruit and vegetable intake of Californian population as a strategy to reduce cancer risk. This effort has been tracked every other year since 1989 with the California Dietary Practices Survey (CDPS). The calibration study examines differences in the number of servings of fruits and vegetables in the general population, particularly among white, Latino, African-American groups and low-income persons. The survey is conducted in the same way as the CDPS. Because of the planned large sample sizes, this study can examine differences in detail across race/ethnic and socio-economic groups. The large sample sizes also makes the results statistically more precise than past surveys.

This study is the largest and most precise fruit and vegetable intake study in California using CDPS methods. A key aim is to measure variation in California's fruit and vegetable intake during different seasons of the year. This allows researchers to adjust both past and future survey data for the different effects of season. If seasonal differences are significant, especially for Latinos or African-Americans, it may help explain the dramatic trends that have been reported in these two groups based on past surveys. As part of this research a new short form version of the CDPS was developed and is also being tested. This will be compared to the full-length (more expensive) CDPS method. A means of adjusting the difference between these two methods will be developed so that the short-form method may potentially be used for future low-cost tracking surveys.

As Year 07 begins, project sample goals are being met, and the project is within budget. By December of Year 07 data collection will be complete and data analysis and report writing will commence. Nearly 11,000 participants will be interviewed distributed evenly among the four seasons being studied. The information collected in this study will be a valuable resource for future research and establish a solid baseline for continued tracking of fruit and vegetable intake into the twenty-first century.

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**CANCER PREVENTION FOR AFRICAN-AMERICANS IN LOS ANGELES***Cancer Research Projects*

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*Description*

Some estimates suggest that changes in diet could reduce cancer deaths by as much as one-third. Increasing the availability of cancer-preventing foods has demonstrated potential to increase consumption of these foods, thereby making a significant contribution to cancer prevention in a population at high risk for prostate and other cancers.

The incidence of prostate cancer among African-American men is nearly 60 percent higher than among white men, and incidence of diet-related cancers is higher among African-Americans compared to other ethnic groups. A diet low in fat and rich in fruits and vegetables appears to be protective against prostate and other cancers. However, nearly half of the African Americans in California eat two or fewer daily servings of fruits and vegetables—a level of consumption associated with much greater cancer risk. A statewide survey shows that while lower-income households eat in restaurants less frequently, they are more likely to dine in fast food restaurants and eat high-fat foods.

This research was funded during Year 05 as a Pilot Community-Initiated Research Collaboration Award (CIRCA), addressing the Cancer Research Program's priority area of primary prevention. It was funded as a CIRCA Full 3-year project beginning Year 06. This project addresses the Cancer Research Program's priority area of primary prevention. Specifically, the project explores "new approaches or policies to remove or mitigate barriers to the adoption of behaviors that have been shown or are believed to reduce or prevent cancers" in Mid and South Central Los Angeles by increasing the availability of low-fat foods and fruits and vegetables in 10-15 grocery stores and restaurants. The target audience for this project is African American residents of four neighborhoods in Mid and South Central Los Angeles.

The project's primary hypothesis is: Holding prices constant, increasing the availability of low-fat dairy and meat, high fiber breads, and higher quality fruits and vegetables in grocery stores will significantly increase consumption of those products. This hypothesis will be investigated using weekly sales data from grocery stores in the intervention and comparison communities, along with new data collected bi-weekly on quality and availability, as measured by shelf space allocated to key food products. A statistical analysis will examine the relative contribution of availability, price, and quality on the purchase of cancer preventing foods. This research will help meet the project's aims:

1. Fully implement a community advocacy model to work with 10-15 grocery stores and restaurants to increase the availability and quality of healthy foods offered.

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2. Scientifically examine changes in purchasing of healthy foods by investigating a) the effects of availability, price, and quality on purchasing healthy foods in grocery stores and b) the impact of increasing the availability of healthy food choices in family-style restaurants on sales of these choices
  3. Widely disseminate the results of the project to community members, decision makers, and researchers in public health and economics.

Local radio station KJLH, The African-American owned local radio station, KJLH, has become a partner in this project. Year 07 activities in progress and planned include:

- Free radio and print ads with healthy food tips featuring area restaurants that make positive healthy food choice changes
- Healthy eating community workshops with tastings hosted by restaurants implementing new menu choices. Over 200 people participated in the first set of workshops in Inglewood
- Links between the popular KJLH website and that of the American Heart Association
- Development of relationships with local and corporate grocery retailers to initiate store tours and designate promotional shelf space for healthy food choices.

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**CANCER PREVENTION: NUTRITION EDUCATION AMONG LOW-INCOME  
VIETNAMESE-AMERICANS IN CALIFORNIA***Cancer Research Projects*

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*Description*

The Vietnamese population is the fastest growing ethnic minority in the United States as well as the fastest growing Asian/Pacific Islander population in California. Currently, one in every hundred Californians is Vietnamese. The majority of Vietnamese Americans are recent immigrants who do not speak or read English. Many families have very limited incomes and qualify for a variety of government nutrition programs such as Food Stamps and free school meals. Preliminary studies suggest that after immigrating to the United States, Vietnamese consume more high-fat, high-cholesterol, high-sodium foods and seasonings and fewer fruits and vegetables than they did in their homeland. (Hung 1995). While evidence points to the protective role played by the consumption of fruits and vegetables in cancer prevention, and a minimum of 5 serving of fruits and vegetables a day is recommended, the mean intake by Vietnamese Californians, according to the same source, is 3.1 per day (versus 4.3 serving among the general U.S. population). Vietnamese Americans adopt a sedentary lifestyle and do not exercise regularly (County of Orange Health Care Agency, Assessment Report, 1998). Among Vietnamese Americans, 43.6 percent of deaths are due to heart disease and cancer (California Vital Statistics, 1987).

The University of California Cooperative Extension (UCCE) serves the most disadvantaged low-income families through its Expanded Food and Nutrition Education Program (EFNEP). UCCE's nutrition specialists provide nutrition education expertise to EFNEP. The coordinator of the Adult EFNEP program works with both state specialists and county home economists to ensure program quality. Paraprofessional Nutrition Education Assistants (NEAs) are the "front line" workers in term of delivering nutrition education to low-income families. NEAs are hired, trained, and supervised by the home economists and are indigenous to their target population and facilitates understanding of the problems and ambitions of those being taught, and when appropriate, speak the language.

In this program, local EFNEP paraprofessionals, who are bilingual and bicultural, deliver culturally relevant nutrition education designed to help low-income Vietnamese participants understand the relationship between diet and cancer. The NEAs support participants as they make changes in their diet to reduce the risk of cancer.

This is a community-based project. The first advisory board meeting was held in February 2000. During Year 05, four focus groups (N=32, 21-78 yo) met in Sacramento, San Francisco, Santa Clara, and Orange County to identify cancer-related knowledge, behavior and beliefs of the under-served Vietnamese population and has used this research to guide the development of Vietnamese language diet and lifestyle change educational materials and training materials for community educators, which were pilot-tested during Year 06. The Vietnamese lessons on diet,

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physical activity, alcohol, and tobacco use, as well as their English translation, can be found at <http://nutrition.berkeley.edu/extension/vietnamese.health/>.

During Year 06 UCCE also recruited and trained EFNEP and FSNEP nutrition paraprofessionals (NEAs) to teach the nutrition education sessions at Nutrition Home Gatherings. The paraprofessionals recruit low-income Vietnamese immigrants to serve as hosts for these gatherings. Hosts invite acquaintances, friends and co-workers to attend the sessions. UCCE bilingual professional nutritionists, who are located in the Nutritional Sciences Department at UC Berkeley, teach the paraprofessionals to deliver lessons about the link between diet, physical activity, and cancer. Hosts and participants receive small incentives and Vietnamese language educational materials.

Self-administered baseline surveys are collected at the first nutrition education session and again at the end of the last session. A follow-up survey is administered by phone one month later. The surveys collect data on demography, knowledge and attitudes regarding the relationship between diet and cancer, changes in fruit and vegetable intake as well as other self-reported dietary changes made as a result of program participation.

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**PUBLIC HEALTH INSTITUTE—EXAMINATION OF COMMUNICATION FACTORS  
AFFECTING POLICYMAKERS***Cancer Research Projects***Peggy Agron**

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*Description*

Health and lifestyle behaviors can cause death, disease, and cancer. Some cancers have been linked to dietary factors such as low fruit and vegetable consumption. Diet patterns nationwide have, in part, resulted in crisis proportions of obese children and placed these youth at risk for chronic diseases such as cancer in adulthood. Obesity now affects one in five children in the United States. Two-thirds to three-quarters of obese adolescents will become obese adults. Poor and/or minority teens are especially at-risk for related health problems.

Schools provide over one third of meals eaten by youth outside of the home. Although the National School Lunch program is required to meet dietary standards, items sold in vending machines, school stores, etc., are exempt. School boards set and enforce local public school policy. They can eliminate policies creating barriers to healthy eating and institute policies encouraging healthy eating.

California Project LEAN, the University of South Florida, the California School Boards Association, the California PTA, and ten California communities formed a partnership to determine if a social marketing communications campaign can increase school board members' support for school nutrition policies. Based on research during the pilot grant, the current project involves creating sample nutrition policies, advertisements and articles, publishing a nutrition policy handbook in Year 07, and participating in state and local-level nutrition policy workshops. A survey of California school board members will determine if knowledge and support for school nutrition policies is affected.

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*Description*

The Center was established in 1999, and uses a multidisciplinary approach to develop methods for program evaluation, provide training and technical assistance, and examine market research and economic trends to promote healthy nutritional practices for cancer prevention in the California population. The Center brings together faculty from the UC Davis School of Medicine including the Departments of Epidemiology and Preventive Medicine, Clinical Nutrition, and the Cancer Center as well as the College of Agricultural and Environmental Sciences, and Departments of Nutrition and Communication. In addition, outside consultants with expertise in nutrition interventions, social marketing and evaluation are involved in the Center. The Center has two aims. The first aim is to conduct research to increase the effectiveness of nutrition and physical activity social marketing campaigns. The second aim is to provide resources and education for community practitioners to strengthen nutrition and physical activity social marketing campaigns. Projects planned for the next two years include developing a social marketing project to increase participation in the School Breakfast Program, implementing an on-line library of evaluation tools for use by local agencies, and to sponsoring small grants for UC Davis researchers on topics in applied nutrition research, such as advanced data analysis of the California Health Interview Survey.